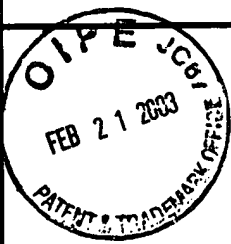
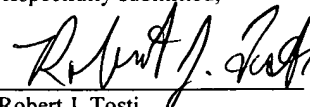


#10

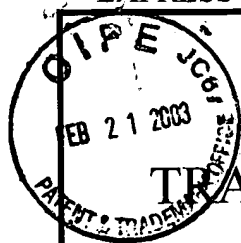
PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Attorney Docket Number ICO-004											
		In re Application of Elsbree et al.											
		Application Serial No. 09/478,775											
		Filed: January 6, 2000											
		Group Art Unit: 2174	Examiner: T.J. Joseph										
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above entitled application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired)</p> <table><tr><td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td><td>\$ 110.00</td></tr><tr><td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td><td>\$</td></tr><tr><td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td><td>\$</td></tr><tr><td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td><td>\$</td></tr><tr><td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td><td>\$</td></tr></table> <p><input checked="" type="checkbox"/> Applicant claims small entity status under 37 CFR 1.27, therefore the fee amount shown above is reduced by one-half, and the resulting fee is: <u>\$55.00</u>.</p> <p><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> The Commissioner is hereby authorized to charge the required fee to Deposit Account No. 20-0531.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Deposit Account No. 20-0531.</p> <p><input checked="" type="checkbox"/> Return receipt postcard enclosed.</p> <p>I am the <input type="checkbox"/> assignee of record of the entire interest. <input type="checkbox"/> applicant. <input checked="" type="checkbox"/> attorney or agent of record. <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). _____</p>				<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ 110.00	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ 110.00												
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$												
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$												
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$												
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$												
CORRESPONDENCE ADDRESS		SIGNATURE BLOCK											
Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibault, LLP High Street Tower 125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100		Respectfully submitted,  Robert J. Tosti Testa, Hurwitz & Thibault, LLP High Street Tower 125 High Street Boston, MA 02110											

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TRANSMITTAL FORM

Application Serial Number	09/478,775
Filing Date	January 6, 2000
First Named Inventor	Elsbree
Group Art Unit	2174
Examiner Name	T.J. Joseph
Attorney Docket No.	ICO-004 (4594/11)

RECEIVED

MAR 03 2003

Technology Center 2100

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form <input type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets _____] <input checked="" type="checkbox"/> Petition for Extension of Time (1 month) <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of IDS Citations <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553) <input type="checkbox"/> Formal Drawing(s) <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program <input type="checkbox"/> Amendment After Allowance <input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate) <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 <input type="checkbox"/> Additional Enclosure(s) (please identify below)
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CORRESPONDENCE ADDRESS

Direct all correspondence to: Patent Administrator
 Testa, Hurwitz & Thibault, LLP
 High Street Tower
 125 High Street
 Boston, MA 02110
 Tel. No.: (617) 248-7000
 Fax No.: (617) 248-7100

SIGNATURE BLOCK

Date: February 21, 2003
 Reg. No. 35,393
 Tel. No.: (617) 248-7374
 Fax No.: (617) 248-7100

Respectfully submitted,

Robert J. Tosti
 Attorney for Applicants
 Testa, Hurwitz & Thibault, LLP
 High Street Tower
 125 High Street
 Boston, MA 02110


TRANSMITTAL
FY 2003

Complete if Known

Application Serial Number	09/478,775
Filing Date	January 6, 2000
First Named Inventor	Elsbree
Group Art Unit	2174
Examiner Name	T.J. Joseph
Attorney Docket No.	ICO-004

RECEIVED**MAR 03 2003**

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METHOD OF PAYMENT

1. ☒ Payment Enclosed:
☒ Check ☐ Money Order ☐ Other
2. ☒ The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531.
☐ Required Fees (copy of this sheet enclosed).
☒ Additional fee required under 37 CFR 1.16 and 1.17.
☒ Overpayment Credit.
3. ☒ Applicant claims small entity status.

FEE CALCULATION**1. FILING FEE**

Large Entity Fee (\$)	Fee Description	Fee Paid
750	Utility filing fee	
330	Design filing fee	
160	Provisional filing fee	

Number Filed	Number Extra	Rate	Amount
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Total Claims - 20 = x \$ 18.00 =

Independent Claims - 3 = x \$ 84.00 =

☐ Multiple Dependent Claim(s), if any \$280.00 =

 TOTAL:
 SMALL ENTITY DISCOUNT:

SUBTOTAL (1) (\$)

2. AMENDMENT CLAIM FEES

Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid
Total	-	=	x \$ 18.00 =	
Indep.	-	=	x \$ 84.00 =	
<input type="checkbox"/> First Presentation of Multiple Dep. Claim			+ \$280.00 =	

 TOTAL: (\$)
 SMALL ENTITY DISCOUNT: (\$)
 SUBTOTAL (2) (\$)
FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
130	65	Surcharge - late filing fee or oath	
50	25	Surcharge - late provisional filing fee or cover sheet	
130	130	Non-English specification	
2,520	2,520	Request for ex parte reexamination	
110	55	Extension for reply within first month	55.00
410	205	Extension for reply within second month	
930	465	Extension for reply within third month	
1450	725	Extension for reply within fourth month	
1970	985	Extension for reply within fifth month	
320	160	Notice of Appeal	
320	160	Filing a brief in support of an appeal	
280	140	Request for oral hearing	
130	130	Petitions to the Commissioner	
180	180	Submission of Information Disclosure Statement	
750	375	Filing a submission after final rejection (37 CFR 1.129(a))	
750	375	For each additional invention to be examined (37 CFR 1.129(b))	
100	100	Certificate of Correction for applicant's error	

Other fee (Specify)

Other fee (Specify)

SUBTOTAL (3) (\$) 55.00

 SUBTOTAL (1)
 SUBTOTAL (2)
 SUBTOTAL (3) 55.00

TOTAL (\$) 55.00

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 Attorney for the Applicants
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